



BAPTIST HEALTH

General Information for Non-BHLOU/BHLAG Employees, Students, Vendors,
Contract Staff, Allied Health Professionals, Forensic Staff and Physicians

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Welcome to Baptist Health

We have provided this guide to assist you in having the best possible experience here at Baptist Health. As you know, there are certain risks that you will be exposed to. In order to minimize those risks, you need to be aware of certain administrative, clinical and safety procedures used at this hospital. The purpose of this booklet is to outline those procedures and provide you with some basic but very important information. We invite you to read and become familiar with the contents. For your protection, you are expected to follow these procedures and instructions while at this facility. Should you have any questions, please contact a hospital staff member for assistance.

If an incident or injury to you or a patient should occur, contact Baptist Health Louisville (BHLOU) or Baptist Health LaGrange (BHLAG), Supervisory Staff, Security or the House Manager immediately.

You will be required to wear a nametag at all times while on the hospital campus. If you have a nametag issued by your school or company, please use this one. If your school or company has not issued a nametag to you, your supervisor may obtain a temporary badge from Security. By wearing a nametag, you will be in compliance with security procedures and regulatory guidelines, and provide identification to staff and visitors. The nametag should be worn in a manner that is readily visible at all times, preferably on the right or left upper chest area of your clothing.

Should you need more information regarding policies & procedures, please contact any hospital staff member for assistance.

Job Shadowing Students Only

Baptist Health's goal is to provide a work-based learning experience that allows students or potential health care workers to observe employees while they are performing their work duties and to provide an opportunity to ask questions about a particular career within the health care field.

Goals and Purpose of Job Shadowing Student Information

You will observe firsthand what really happens in the workplace. Job shadowing gives you the opportunity to observe health care workers in a realistic job preview. During your job shadowing opportunity, you learn what skills are needed for a job in the health care field.

Commitment to Service Excellence and Standards of Conduct

During your job shadowing opportunity, you will be expected to maintain excellent customer service and conduct yourself as a professional. Please carefully read the expected standards of conduct expected during your shadowing experience.

Forensic Staff Only

The purpose of this Information & Guideline booklet is to outline Hospital Security procedures, patient restrictions, and to provide you with safety information in addition to the Department of Corrections (DOC) Post Order requirements. As a joint effort between Hospital Security and the DOC to maintain a safe environment, DOC Officers are to become familiar with the contents of this booklet.

For clarity of positions and status, the following definitions apply:

- **Forensic Patient:** A patient in legal custody of law enforcement officers or a correctional facility.
- **Forensic Staff:** External security officers, corrections officers, prison guards, police officers, sheriffs, marshals, etc. and all law enforcement officers.
- **Law Enforcement Officer (LEO):** A member of a lawfully organized police unit or police force of county, city or metropolitan government who is responsible for the detection of crime and the enforcement of the general criminal laws of the state, as well as sheriffs, sworn deputy sheriffs, campus police officers, law enforcement support personnel, public airport authority security officers, other public and federal peace officers responsible for law enforcement, and special local peace officers licensed pursuant to [KRS 61.360](#).

Forensic staff and or a law enforcement officer must accompany forensic patients at all times. Forensic staff and or the LEO must remain with the patient when moving within the hospital and ***must be in visual contact with the patient at all times***. The Kentucky Department of Corrections requires a forensic patient to be restrained using handcuffs, leg irons, shackles, or flex cuffs, per CMS Conditions of Participation. The forensic patient will be restrained prior to entrance into the hospital per the law enforcement agencies policy and remain so while in the hospital, unless the patient's condition prohibits such measure.

ORIENTATION AND EDUCATION:

Orientation and education for Forensic Staff to include LEOs will include:

- How to interact with staff and forensic patients.
- Procedures for responding to unusual clinical events and incidents.
- Channels of clinical, security and administrative communication.
- Distinctions between administrative and clinical seclusion and restraint as outlined by the accrediting body.

FORENSIC STAFF AND WEAPONS:

Properly credentialed Forensic Staff and LEOs are permitted to possess weapons (e.g. firearms) while accompanying and transporting forensic patients on hospital grounds. Forensic staff that do not satisfy the definition of “law enforcement officer” will not be permitted to possess weapons on hospital grounds (See Weapons policy).

The supervision and control of a forensic patient who requires medical care is the responsibility of the forensic staff accompanying the patient. Security may assist forensic staff when requested or if the patient’s actions present an imminent and unavoidable threat to hospital staff, patients or visitors.

SAFETY MEASURES:

Forensic patients are not permitted to have visitors, use of telephone, or other communication devices including mail while within the hospital. Exceptions will be made for extenuating circumstances (e.g. end of life), however must be approved by the following:

- Correctional facility administration
- House Manager

If a forensic patient engages in intentional disorderly and or inappropriate conduct that:

1. Prohibits the safe and timely delivery of care to the patient
2. Jeopardizes the safety of Baptist Health La Grange staff, visitors or patients

The House Manager will be notified. If the disorderly and or inappropriate conduct continues, the correctional facility from which the forensic patient originated will be notified of the situation and the patient returned.

For safety purposes, and per required procedures from the correctional facility(s), all discharge instructions that include any future appointments, timeframes for follow-up, etc. are placed in a sealed envelope and provided to the forensic staff. The forensic staff are responsible for providing the information to the facility’s Medical Staff upon return.

If the forensic staff and or LEOs actions, or lack thereof, create an unsafe situation or environment the House Manager will be notified immediately. Unsafe or inappropriate actions include but are not limited to:

- Failure to observe the forensic patient in a reasonable and appropriate manner.
- Not adhering to appropriate forensic patient restraint policies and practices.
- Refusal to adhere to applicable hospital policies and procedures.

Security leadership will provide a summary of the action or inaction in question to the correctional facility’s administration.

All Baptist Health La Grange staff will adhere to the following forensic patient safety measures. These include, but are not limited to:

- No metal objects (soft drink cans, silverware, etc.) will be allowed in the possession of forensic patients. Meals will be delivered utilizing plastic, disposable utensils.
- All mobile equipment not utilized in the course of the patient's care should be removed from the patient room when not in use.
- Stethoscopes should not be worn draped around the neck of the caregiver.
- Additional safety measures, include but are not limited to:
 - ▶ Do not provide information about yourself or other staff members.
 - ▶ Do not provide the forensic patient with the date of follow up appointments.
 - ▶ Provide a walker, instead of crutches, when possible.

EMERGENCY SITUATIONS:

Forensic staff and LEO's have no direct role in emergency procedures not related to the forensic patient under their care and control. Note: this does not include events that could result in serious bodily harm or death in which a LEO would be compelled to intervene (e.g. Active Shooter). Should an emergency occur involving the forensic patient, a member of the hospital staff will provide guidance on the appropriate action to be taken and request the forensic staff's assistance. Security is responsible for maintaining a log of forensic patients.

NON-FORENSIC PATIENTS: Community custody and furlough patients are those who have been granted special liberties within the prison system. They are not considered a safety risk while in this status, therefore are not in the care and custody of forensic staff.

Mission, Vision, Values

As an organization, we place the highest priority on our mission, vision, and values and believe the best way to ensure they are fulfilled is to treat our employees with the same high regard we have for our patients. This regard is reflected in a variety of ways, such as working environment, compensation and benefits plans, and opportunities for training and advancement. We are grateful to the thousands of employees who have chosen Baptist Healthcare System since the organization was founded in 1924.

Mission Statement

Baptist Health demonstrates the love of Christ by coordinating care and improving health in our communities.

Vision Statement

Baptist Health will lead the transformation to healthier communities.

Values Statement

As a faith-based health system, Baptist Health places special emphasis on the values of: Integrity, Respect, Excellence, Collaboration, Compassion and Joy.

Performance Standards

A set of performance standards, developed by Baptist Health employees, establishes

specific behaviors that all employees are expected to practice while on duty. These performance standards and specific behaviors are expected of all job shadowing/clinical students. Communication, Confidentiality/ Privacy, Professional/Excellence Orientation, Ownership /Stewardship, Teamwork/Commitment to Co-Workers and Safety.

Confidentiality Overview

Confidentiality of patient information must be foremost in everyone's mind. Do not discuss outside of your work duties anything you hear or see during your time here at BHLOU/BHLAG. When discussing patient information is necessary, it must be done discreetly (where it could not be easily overheard) and only for proper medical or administrative reasons.

- Divulging confidential information to others is prohibited. Confidential information includes any matter relating to patients, including but not limited to their medical records, illness, personal problems, financial matters, or even being a patient in the hospital or outpatient services. It also relates to the organization's administrative or financial records, personnel records, personnel-related incidents, and incidents relating to the medical staff (physicians).
- Examples of patient information considered confidential include:
 - Acknowledging that an individual is receiving care here; dates of admission and discharge;
 - Patient demographic information, such as name, address, phone number, , i.e., age, gender, income, etc. (even if a patient name is not revealed);
 - Patient diagnosis, condition, and test results;
 - Photographical images of patients and patient information.

Patients must be able to communicate in confidence with caregivers. Individuals who betray this policy not only do an injustice to the patients and the organization, but also may impair public relations and invite legal action.

Important confidentiality points to remember:

- All patient information is confidential and must not be discussed outside the facility. This applies to follow-up classroom or conference discussions or reports between classmates, teachers, counselors, vendors, and contract staff. These discussions or reports must focus on the mentor and the learning experience, not the patient.
- Breaching confidentiality is a serious offense that may result in termination of the relationship. Legal action by aggrieved parties might also result.
- A breach of confidentiality may occur even when there is no intent to injure another. Examples of an unintentional breach of confidentiality include: discussing patient information in an area where information may be overheard by others; asking an employee about a friend's test results; or throwing copies of reports with patient information in an open recycle or trash container.
- If you are in a setting where others are inappropriately discussing confidential information, it is your responsibility to protect a patient's right to privacy by speaking up and reminding others of patient confidentiality.
- If a non-family member or non-medical staff asks a question about a patient, refer the individual to the patient's nurse or other best source of information.

Dress/Appearance Guidelines

Following dress codes helps students' presentation, an appearance, which makes a favorable impression on our customers. Student must present a neat and professional appearance. Students who do not comply with the dress/appearance guidelines will not be permitted to shadow. The following dress is required:

- Clothing must be clean, pressed, fit appropriately, and suitable for daytime wear.
- Collared shirts or blouses. Novelty shirts will not be permitted.
- Shoes and socks are required. Comfortable shoes such as tennis shoes are recommended.
- Hats, shorts, or skirts of an inappropriate length are not permitted.
- Jeans will not be permitted. Khaki style pants are recommended.
- Excessive perfume and excessive makeup is not allowed.
- No cell phones or pagers will be permitted.
- Valuables such as jewelry should be left at home.
- Scrubs or protective clothing will be provided in departments that require them as part of a department's specific dress code.
- Small tattoos are permitted but must not be obscene, or advocate sexual, racial, ethnic or religious discrimination. Facial tattoos are not permitted. Employees may be asked to cover any tattoo if it could be potentially offensive to others (body art with nudity, horror, etc.) or if patient, vendor or co-worker complaints are received.

Hygiene

All students are expected to dress appropriately, and are expected to report to the assignment in a neat, clean, and well-groomed manner. Good personal hygiene is required. Offensive odors, unkempt hair and open wounds are unacceptable hygiene situations. Poor hygiene will terminate the job shadowing experience or clinical rotation.

Parking

Please refer to the Parking Policy.

No Solicitation

Not permitted on Baptist Health Louisville/ La Grange Properties

Sickness or Emergency

In the event of an illness, injury, or emergency, please tell your mentor or another department staff member immediately.

Special Needs

Students needing accommodation or other services should contact Human Resources: BHL0U-502-897-8822; BHL0G- 502-222-3322.

Hospital and Safety Contacts

Security Department - Baptist Health

The Security Department is staffed 24 hours per day, 7 days per week to provide a safe and secure environment for the staff, physicians, patients, visitors, and everyone else at Baptist Health. Security uses both roving patrols and targeted zones to monitor the activity in and around the hospital campus. Security may be contacted by dialing “0” from any hospital phone for non- emergency assistance.

If you ever have questions or comments regarding a safety or security issue, please contact any of the following:

Contact	Topic	Phone (In-House)		Phone (Outside)
		BH Lou	BH Lag	
Safety Officer	Hospital Safety	6292	3357	Lou: 502-928-6292 Lag: 502-225-5439
Security Department	Security Issues or Concerns / Non-Emergency	0 or 8045	0 or 645-9380	Lou: 502-897-8045 Lag: 502- 645-9380
Radiation Safety Officer	Radiation Safety Issues	8121	3620	Lou: 502- 897-8121 Lag: 502- 222-3620
Social Work Office Cooperative Care Program	Reporting Abuse	8806		Lou: 502- 897-8806 Lag: 502-222-8620
Operator	General Information	0	0	Lou: 502- 897-8100 Lag: 502- 222-5388
House Manager	Any Patient Related Issue or Safety Issue	7854	8620	Lou: 502- 897-7854 Lag: 502- 222-8620
Patient Safety Officer	Any Patient Safety Issue	259-4096	225-5439	Risk Manager On- Call

Baptist Healthcare System Corporate Compliance Program

Baptist Health Louisville and Baptist Health La Grange are two of eight hospitals within the Baptist Healthcare System. Our system is committed to the highest standards of business conduct and compliance with applicable laws and regulations. A Corporate Responsibility Program containing Standards of Conduct has been developed as a reaffirmation of our long-term commitment to compliance and quality of services to our patients and the communities we serve. As a Non-Baptist Health Employee, Student, Vendor, Contract Staff, Allied Health Professional, or Physician you are required to comply with the Baptist Healthcare System Standards of Conduct and Federal False Claims Act Information Policy located at Compliance Baptist Health.

By signing and submitting the acknowledgement page located at the back of this booklet, you **acknowledge that you received a copy of this booklet, and are familiar with the BHS Standards of Conduct as follows.**

BHS Standards of Conduct

To help us achieve our Mission in a practical, professional, and ethical way, we have established Standards of Conduct for all employees, non-employees, vendors, agency personnel, students, volunteers and medical staff within our System:

- The business of Baptist Healthcare System (BHS) will be conducted according to all applicable federal, state and local laws.
- All individuals working within Baptist will perform their responsibilities in light of our Mission and with honesty, integrity and professionalism.
- All individuals working within Baptist should perform their responsibilities in ways that avoid conflicts of interests; this includes our employees, agency personnel, volunteers, and the medical staff within Baptist.
- All billing by BHS entities will be for the services and items actually provided, in keeping with the rules of the government and other payers.
- When working with our medical staff, contractors and other healthcare organizations whether internal or external to our System, all BHS employees will conduct themselves in keeping with applicable laws, in particular, those laws that prohibit fraud and abuse, waste, restraint of trade and improper benefits.
- All individuals within our BHS entities will strive to maintain a cooperative relationship of mutual trust with all government agencies.
- BHS will vigorously pursue its Corporate Responsibility Program to achieve all Compliance Objectives and to develop a culture of compliance throughout the System.
- Licensed and other professional employees working at Baptist are expected to adhere to any ethical standards required by their respective licensing agencies and to follow any ethical guidelines recommended by their professional association

Your voice is important! Baptist Health relies on you to speak up if you have observed unethical, inappropriate or illegal behavior. When you speak up, you provide the information necessary to investigate and remedy a potentially damaging situation. Below is contact information for reporting concerns or submitting questions about compliance-related matters.

Contact	Phone
BHLOU Compliance & Privacy Officer	502-259-4545
BHLAG Compliance & Privacy Officer	502-225-5456
BHS Corporate Compliance Office	502-896-5021
Baptist Health Compliance Hotline	1-833-204-8787

BHLOU/BHLAG/BHS HIPAA Security

The Administrative Simplification provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA, Title II) required the Department of Health and Human Services (HHS) to establish national standards for the security of electronic health care information. The final rule adopting HIPAA standards for security was published in the Federal Register on February 20, 2003. This final rule specifies a series of administrative, technical, and physical security procedures for covered entities to use to assure the confidentiality of electronic protected health information. The standards are delineated into either required or addressable implementation specifications.

The HIPAA Security Rule requires BHS to have policies and procedures in place to protect the confidentiality, integrity and availability of electronic protected health information.

Confidentiality: Only authorized people have access to protected health information.

Integrity: Prevent protected health information from being lost, stolen or corrupted.

Availability: Ensure the availability of protected health information when needed.

HIPAA Security applies to you from the time you are employed to the time you leave on your last day of employment. Electronic protected health information (EPHI) must never be divulged at any time, regardless of whether or not you are “on-the-clock” or on the premises, or on or off the BHS network. You are always responsible for pre- serving the confidentiality, integrity and availability of BHS EPHI. Employees, contractors and business associates who do not comply with BHS HIPAA Security Policies and Procedures could be fined, put on probation, terminated, or lose their contract with BHS.

- Keep your password safe. Never share your password with anyone. No one within or outside of BHS – including IS Support – is authorized to request passwords.
- Don’t write down your password and don’t post them anywhere.
- Choose passwords that would be difficult for someone to guess. Avoid using the names of your children, spouse or pets as your password.
- Create passwords that contain both numbers and letters, and whenever possible, such special characters as &, \$, *. Combine uppercase letters with lowercase where permitted. Also, use the maximum number of characters permitted where feasible.
- Change your password on a regular basis where possible and feasible.
- When you are logging onto the System, be aware of people who might be looking over your shoulder. “Shoulder Surfing” is a common way to obtain someone’s password.
- Always logoff your system when your computer is unattended.
- Be aware of who is accessing protected health information. Do they have a BHS ID badge? Are they authorized to use the computer?
- Use caution when responding to emails, phone calls, and text messages requesting any sensitive information or directing you to unknown links/attachments– user account compromises are commonly initiated this way.
- Position your computer monitor away from public areas whenever possible
- Don’t turn a blind eye to security breaches. Report any suspected or actual breaches of information security to the BHS Compliance Hotline (1-833-204-8787), or anonymously at [Syntrio: Illuminating Corporate Integrity](#)

Use of Electronic or Mobile Devices

We understand the value of external electronic mobile devices for research and patient care. However, external electronic mobile devices (Tablet, Laptop, Smartphone) may not be used at the bedside, public corridors of patient units/areas, or within the patient room and while working in the patient medical records. Additionally, the camera, audio, or video recording functions of any external electronic mobile device may not be used under any circumstances.

Additionally, according to Baptist Health Policy texting of patient information is strictly prohibited. This is outlined in section F of the policy *Controls for Device and Media Containing Electronic Protected Health Information (ePHI) and BHS Proprietary Data*.

BHLOU/BHLAG will not be responsible for the security of any external electronic mobile device brought into the facility.

Patient Rights

Baptist Health respects the rights and responsibilities of patients and families. We communicate these rights with every patient at the time of registration and all admitted patients receive the Patient Guide. A copy of the patient's rights and responsibilities can be obtained from Admitting. Every patient has the right to respectful, considerate care; to information and discussions about diagnosis, treatment, alternatives and medical consequence; prognosis and financial considerations. Efforts will be made to keep patients and families informed, empowered, responsible and integrated into decision-making processes. If you have any questions or comments regarding patient rights, please contact a supervisor or manager.

Take patient complaints and concerns seriously.

- Everyone is responsible for responding to patient complaints.
- We will respond to patient, family, and co-worker concerns using G.R.E.A.T.™ Service with H.E.A.R.T.
 - Hear-hear them out, without judging or interrupting
 - Empathize-Being sensitive to the subject and situation
 - Apologize- "I am sorry we did not meet your expectations."
 - Respond- summarize the requests and take action to respond
 - Thank- "Thank you for bringing this to my attention."
- If a complaint has not been resolved or needs additional follow-up, please involve your Charge Nurse, Supervisor, Manager or reach out to the Patient Relations Office.

Ethical Issues

At Baptist Health, we have a mechanism for reporting ethical issues arising from medical treatment of patients. The Hospital Ethics Committee is not a decision-making body, but is available to provide advice, consultation, and education in ethical issues involving medical treatment. Anyone can request that the committee consider an ethical issue by contacting Pastoral Care at 897-8804 for BHLOU or 222-3340 for BHLAG. Pastoral Care is also available for consultation.

Cultural Awareness

Cultural awareness is an understanding and respect of people and their values, beliefs, and practices. People of different religious, language, physical size, sexual orientation, age, disability, socio-economic, occupational status, geographic location are part of our diverse culture. On a personal level of cultural awareness is to how we recognize diversity in the people we work with and the patients that we care for. Understanding a patient's cultural view on health helps maintain their right to be treated with respect and dignity, to enhance teamwork by understanding the values of co-workers' culture and to meet Joint Commission standards. *For more information, please refer to the following BH policy: Interpreters, Communication for Deaf and Hearing Impaired.*

Responding to Unusual Clinical Events, Incidents or Medical Emergencies

Immediately report any medical emergency to the appropriate clinical staff member. In the absence of a clinical staff member, report the emergency to any hospital staff member. Hospital staff members can be identified by hospital name badges. During medical emergencies, please follow the clinical advice and directives of the primary care provider.

If you have any medical or patient care concerns, discuss those concerns with the clinical staff. Any student, vendor, or contract staff wishing to address an issue above the clinical level may ask the clinical staff member to contact the House Manager. The House Manager may be contacted by dialing the operator ("0") from any house phone.

Patient Safety

There are various risks associated with being a patient within a health care facility. We at Baptist Health want to make sure you understand that you play a vital role in patient safety as well as your own safety. The following are examples of patient risks:

- Inaccurate patient identification
- Ineffective communication
- Medication errors
- Adverse Drug Events
- Healthcare-associated infections
- Blood Transfusion Reactions
- Medical devices
- Latex allergies
- Falls

Patient armbands are color coded to alert you of possible risks.

BHLOU and BHLAG use the Following Armbands

Yellow– High risk for falls

Orange – Latex allergy

White with yellow stickers - Blood Bank ID bracelet

Pink - Restricted Use Extremity

Minimizing or eliminating patient safety risks before an incident occurs is our priority; therefore, we embrace a just culture when reporting possible patient safety hazards. In order to minimize or eliminate these risks before an incident occurs, you are encouraged to contact a Clinical Manager with your concerns as soon as possible.

CODE H

A Help-Line for Patients and Families

Josie King was an 18-month-old little girl who died because of hospital errors in one of the best hospitals in America. Josie King’s mother stated, “Josie’s death was not the fault of one doctor, or one nurse, or one misplaced decimal point, it was the result of a total breakdown in the system.” Through the creation of a patient safety program, the King family’s hope is to help prevent this from ever happening to another patient.

What is a Code H

- Stands for Help
- Provides a means for the patient or the family to call for immediate help if a change in the patient’s condition occurs -----to seek HELP when necessary
- Can be called by anyone (including patient caregivers, visitors, family members, or the patient)

Why Would a Code H be called

- If there is a noticeable, clinical change in the patient and the healthcare team is not present or
- Not responding to the patient’s or visitor’s concerns
- If there is a breakdown in how the care is being managed

How to call a Code H

To Call a Code H

1. Call **extension 4444** or dial **259-4444** at **BHLOU**
2. Call **extension 6868** or dial **222-6868** at **BHLAG**
3. Provide name, the concern, and the room number
4. A trained hospital operator will triage the call and notify the appropriate department(s) and the House Manager

Who responds to a Code H

One of the following will respond depending on the nature of the call:

- The charge nurse on the unit
- The House Manager
- The appropriate department’s supervisor (environmental, dietary, engineering, etc.)







STROKE

If you identify that a patient is exhibiting any of these signs or symptoms, immediately call a Rapid Response. A critical care nurse will respond and evaluate the patient, notify the stroke team, and coordinate care to ensure the patient is treated appropriately and quickly.

SPOT THE SIGNS

BE FAST IF YOU SUSPECT A STROKE

Treatments Are Most Effective When Given Shortly After The Onset Of A Stroke. Learn The Warning Signs & Act Quickly If You Notice Any Of These Symptoms:

B 	E 	F 	A 	S 	T 
BALANCE Loss of balance, headache, dizziness	EYES Blurred vision	FACE One side of the face is drooped	ARMS Arms or leg weakness	SPEECH Speech difficulty	TIME Time to call for an ambulance immediately

IN KENTUCKY AND INDIANA, STROKE IS THE #5 KILLER & THE #1 CAUSE OF ADULT DISABILITY.

A stroke happens when a hemorrhage or blood clot prevents the flow of blood, oxygen and nutrients to an area of the brain. This causes certain symptoms that come on suddenly and may lead to permanent loss of speech, movement and memory. Your risk for severe disability or death increases with every minute blood flow to the brain is blocked and a stroke goes untreated.

If you call 911 at the earliest signs, you'll get the most effective treatment for yourself or a loved one.



Emergency Medical Assistance

Emergency Medical Assistance (EMA) outlines a process for interventions when an individual (other than a patient) needs emergency medical evaluation, treatment and stabilization. If aware of a non-patient on hospital property in need of medical assistance, notify the operator by calling 897-8300 and inform them that emergency medical assistance is needed along with the location. Responders include Security, House Manager and/or ED Charge Nurse. Responder(s) will arrive at the location and determine the level of assistance needed and mode of transportation based on the victim's status. It may be necessary to call 9-1-1 based on the situation and the location of the victim. If trained in life-safety, begin CPR and use AED when available while awaiting EMA responder. AEDs are located throughout the facility and hospital campus.

SBAR (Situation, Background, Assessment, Recommendation)

Communication plays a critical role in the healthcare setting. SBAR is a communication technique that helps with effective communication and it is considered to be a best practice for standardized communication. The expectation at Baptist Health is to use SBAR consistently to promote patient safety and quality care. Staff and physicians are to communicate using SBAR to share patient information in a clear, complete, concise and structured format to communication efficiently and accurately.

- **Situation**: What's the situation, patient or project?
- **Background**: What's important to communicate, including problems and precautions?
- **Assessment**: What is my assessment of the situation, problems and precautions?
- **Recommendation / Request**: What is my recommendation, request or plan?

Additionally, Baptist Health Louisville/La Grange has an organization-wide commitment to continuously strive for the safest environment possible for our patients. BHLOU/BHLAG has procedures and/or committees in place to actively support the National Patient Safety Goals identified by Joint Commission.

The 2024 National Patient Safety Goals are as follows:

- **Identify Patients Correctly**
 - Use at least two ways to identify patients. For example, use the patient's name and date of birth. This is done to make sure that each patient gets the correct medicine and treatment.
 - Make sure that the correct patient gets correct blood when they get a blood transfusion.
- **Improve Staff Communication**
 - Get important test results to the right staff person on time
- **Use Medications Safely**
 - Before a procedure, label medications that are not labeled. (e.g. syringes, cups, basins). Do this in an area where medications and supplies are set up.
 - Take extra care with patients who take medicines to thin their blood.
 - Record and pass along correct information about a patient's medicines. Find out what medicines the patient is taking. Compare those medicines to new medicines given to the patient. Give the patient written information about eh medicines they need to take. Tell the patient it is important to bring their up-to-date list of medicines every time they visit a doctor.
- **Prevent Infections**
 - Use the hand cleaning guidelines from the Center for Disease Control and Prevention or the World Health Organization. Set the goals of improving hand cleaning. Use the goals to improve hand cleaning.
- **Identify Patient Safety Risks**
 - Reduce the risk for suicide
- **Improve health care equity**
 - Improving health care equity is a quality and patient safety priority. For example, health care disparities in the patient population are identified and a written plan describes ways to improve health care equity
- **Prevent Mistakes in Surgery**
 - Make sure that the correct surgery is done on the correct patient and at the correct place on the patient's body.
 - Mark the correct place on the patient's body where the surgery is to be done
 - Pause before surgery to make sure that a mistake is not being made
- **Use Alarms Safely**
 - Make improvements to ensure that alarms on medical equipment are heard and responded to on time.

There are many elements of the National Patient Safety Goals that include specific

identifiers to use prior to treating or transporting a patient; a read-back of orders and critical test results; unapproved abbreviations; look-alike/ sound-alike drugs; and, hand-hygiene guidelines. Please contact a Clinical Manager for more specific information.

Sentinel Events

Per the Joint Commission, a sentinel event is a patient safety event (not primarily related to the natural course of the patient's illness or underlying condition) that reaches a patient and results in any of the following:

- Death
- Permanent harm
- Severe temporary harm

An event is also considered sentinel if it is one of the following:

- Suicide of any patient receiving care, treatment, and services in a staffed around-the-clock care setting or within 72 hours of discharge, including from the hospital's emergency department (ED)
- Unanticipated death of a full-term infant
- Discharge of an infant to the wrong family
- Abduction of any patient receiving care, treatment, and services
- Any elopement (that is, unauthorized departure) of a patient from a staffed around-the-clock care setting (including the ED), leading to death, permanent harm, or severe temporary harm to the patient
- Hemolytic transfusion reaction involving administration of blood or blood products having major blood group incompatibilities (ABO, Rh, other blood groups)
- Rape, assault (leading to death, permanent harm, or severe temporary harm), or homicide of any patient receiving care, treatment, and services while on site at the hospital
- Rape, assault (leading to death, permanent harm, or severe temporary harm), or homicide of a staff member, licensed independent practitioner, visitor, or vendor while on site at the hospital
- Invasive procedure, including surgery, on the wrong patient, at the wrong site, or that is the wrong (unintended) procedure‡
- Unintended retention of a foreign object in a patient after an invasive procedure, including surgery
- Severe neonatal hyperbilirubinemia (bilirubin >30 milligrams/deciliter)
- Prolonged fluoroscopy with cumulative dose >1,500 rads to a single field or any delivery of radiotherapy to the wrong body region or >25% above the planned radiotherapy dose
- Fire, flame, or unanticipated smoke, heat, or flashes occurring during direct patient care (in use) caused by equipment operated and used by the hospital
- Any intrapartum (related to the birth process) maternal death
- Severe maternal morbidity (not primarily related to the natural course of the patient's illness or underlying condition) when it reaches a patient and results in permanent harm or severe temporary harm.

- Fall resulting in any of the following: any fracture; surgery, casting or traction; required consult/management or comfort care for a neurological (e.g. skull fracture, subdural or intracranial hemorrhage) or internal (e.g. rib fracture, small liver laceration) injury; a patient with coagulopathy who receives blood products as a result of a fall; or death or permanent harm as a result of injuries sustained from the fall (not from physiologic events causing the fall)

Disclosure

Disclosure is communicating facts regarding a serious unanticipated adverse outcome or a significant medical error to the patient, family, or guardian. Staff and physicians will need to obtain information regarding the event and only facts should be communicated to the patient/family. It is important for at least two people (Management/Staff and Physician or Leadership) to participate in the disclosure. Staff, Management or Physicians should notify Patient Safety/ Risk Management prior to the disclosure to provide details surrounding the event and to obtain contact information for who the patient/family should contact at the hospital after the event has been disclosed.

Abuse/Neglect/Exploitation

In Kentucky, there exists a statutory duty to report known or suspected adult or child abuse. The statute states that any person who becomes aware of such cases must report them to the Department of Social Services, Adult Protective Services Intake and/or Child Protective Services. Healthcare professionals/hospital workers will use established indicators to identify possible adult/adolescent/child victims of abuse, neglect, or exploitation.

What if you suspect a patient is the victim of Abuse/Neglect?

This suspicion must be reported. Reporting may be done by anyone, licensed or non-licensed staff. Complete the Suspected Abuse/Neglect Reporting on line submission. <https://prd.webapps.chfs.ky.gov/reportabuse/Home.aspx> or via phone at 1-877-597-2331.

What if you suspect a patient is being Abused, Neglected or Exploited by a BHLOU/BHLAG Employee?

If you suspect ANYONE who is interacting with our patients is doing so inappropriately whether they are: physician, co-worker, vendor, supervisor, another department, etc., this suspicion must be reported to the BHLOU/BHLAG Supervisor or House Manager as soon as you become aware of the event. Also, if a patient tells you they were fearful, scared, mistreated, assaulted, or threatened by an employee, you should notify a manager or supervisor immediately, even if the patient is under the influence of an illegal substance/alcohol or has some type of cognitive issue. The following also must occur:

1. Remove the alleged offender from patient care immediately to ensure all patients are safe.
2. Nursing must complete a head-to-toe assessment of the patient, including vitals and document the assessment within 30 minutes of report.
3. Retain all clothing and linens and secure in a plastic bag
4. The patient's physician must be promptly notified of the allegation.
5. Provide emotional support to the patient and update the patient's care plan.
6. Notify the Administrator on Call (AOC) and Risk Management.

Restraints

At Baptist Health, restraints are to be used only in accordance with a Licensed Independent Practitioner's order when medically necessary to improve the patient's well-being or to ensure the safety of the patient or others. Per our policy, restrained patients will be continually assessed, monitored, and re-evaluated.

Types of Restraints:

Physical restraints are defined by any manual method, physical, or mechanical device, equipment or material, attached or adjacent to the patient's body, that he or she cannot easily remove; used to restrict freedom of movement of the patient or a portion of the patient's body, limiting normal access to his or her body.

Chemical restraints are defined as medication used to control behavior or to restrict a patient's freedom of movement and not considered standard treatment or dosage for the patient's medical or psychiatric conditions.

Electrical and Equipment Safety

Malfunctioning electrical equipment is the leading cause of accidental death and fires in hospitals. For this reason, it is important for you to be aware of some general electrical safety guidelines used at Baptist Health Louisville/ Baptist Health La Grange.

- All electrical equipment brought into the hospital should be inspected by our Engineering Department.
- Do not use multiple plug adapters.
- Do not use extension cords.
- Do not place electrical equipment on metal or wet surfaces.
- Report any burning odors to Engineering.
- Do not touch anyone in contact with an electrical current.
- Disconnect any malfunctioning equipment, put a warning sign on the equipment, and report it to our Engineering Department.

For questions while at BHL OU, please contact the Engineering Department by dialing 8177 from any house phone during the hours of 7 am to 4 pm Monday through Friday. After 4 pm and on weekends, Engineering can be paged at 675-0998.

Baptist Health La Grange, contact the Engineering Department by dialing 3940 from any house phone during the hours of 7a-4:30p, M-F. After 4pm and on weekends, notify the House Manager at 222-8620. Engineering can be called in for emergency issues.

Utility Safety

Loss of Electrical Power

In the event of a loss of hospital electrical power, the hospital has a back-up emergency generator to supply power. The power generator will take approximately 8-10 seconds to come on-line. Once on, the generator will supply power ONLY to electrical receptacles marked or lighted in red. While power will be greatly reduced, there will be enough power for employees to adequately carry-on the duties and responsibilities of patient care.

Elevator Failure

In the event that an elevator in which you are riding becomes stuck at or in between floors, use the phone or intercom located in the box just below the control panel to call for help. Once you pick up the phone / activate the intercom, you will be connected directly with the hospital operator. Report the problem to the operator, your location, and any other pertinent information (such as if patient care is necessary). Baptist Health La Grange, the 1023 Shared Suites/Conference Area-contact the operator and report the problem.

Medical Gas Procedures

Our hospital provides several medical gases for our patients. In the event of an emergency, it may be necessary for those medical gases to be shut off. The Respiratory Therapy Department is the PRIMARY department responsible for the shut off.

Medical Equipment Safety

Medical Equipment Safety is everyone's responsibility. Joint Commission requires that all new medical equipment be checked for correct operation and safety prior to being used in our hospital. At Baptist Health Louisville and La Grange, the Clinical Engineering Department is responsible for performing those safety checks and maintaining an accurate inventory of medical equipment:

- Inventories and performs the safety and operational checks on medical equipment prior to being delivered to the clinical areas.
- Tracks equipment as it is received, utilized and taken out of service at the end of its useful life.

How to Contact Clinical (Biomedical) Engineering

The Clinical Engineering Department can be contacted in the following ways:

BHLOU

- Monday–Friday, 7:00am–3:30pm: After 3:30pm, weekends & holidays
 - Put in a Biomed work order through BEN. If urgent, call x8130 from any house phone, and follow the prompts.

BHLAG

- Monday–Friday, 7:30am–4pm: After 4pm, weekends & holidays
 - Dial 3949 or 222-3949 from any house phone
 - Put in a Biomed work order through BEN. If urgent, call x8130 from any house phone and follow the prompts.

If you have questions about the Clinical Engineering Department, such as hours of operation, how to obtain service, etc. you can visit our department website on the intranet homepage (BEN) and click on Our Company>Team Sites>Clinical Engineering.

Emergency Codes

An emergency is considered to be any event that disrupts the ability to provide medical care and treatment. Such emergencies or disasters could include: fires, natural catastrophes (earthquakes, tornado, snow/ice), large-scale accidents involving aircraft, trains, motor vehicles, or explosives, hazardous material accidents, threatening behavior or misconduct by someone in the hospital, cardiac arrest, etc.

At Baptist Health, codes have been established to allow the hospital to continue operations in the event of an emergency or disaster, and to provide safety for hospital employees, patients and visitors. In the event of an emergency or disaster, please be aware of the following codes. If there is an emergency, follow the directions of staff.

*Code Blue - Cardiac Arrest (Adult/Pediatric)
*RRT – Rapid Response
Fire Alarm Activation
Missing or Abducted Infant or Child
Internal or External Disaster
Workplace Violence/Threat of Violence
Security STAT/Security Assistance Required
Bomb Threat or Suspicious Package
Internal or External Hazardous Materials Spill
Active Shooter
Severe Weather (Tornado, etc.)

Event Type	Meaning	Response	To Initiate
All Clear	Emergency Over	Resume Normal Operation	
Bomb Threat or Suspicious Package	Threat of Bomb or suspicious package in Hospital	Report Any Suspicious Behavior or Items to Security Immediately. Know Location of Exits and How to Evacuate Building, if necessary.	LOU: x 8300 LAG: x 3333
Code Blue	Cardiac Arrest (adult or pediatric patient)	Stay with the Person Until Help Arrives	LOU: x 8300 LAG: x 3333
External Hazardous Materials Release	Biological, HAZMAT Spill or Chemical, Explosive, Nuclear or Radiological Event	Facility is Locked Down	LOU: x 8300 LAG: x 3333
Internal Hazardous Materials Release	Hazardous Material Spill	<ul style="list-style-type: none"> – Rescue everyone from the affected area. – Move everyone away from the area – Call the PBX Operator, and report an Internal Hazardous Materials Release/Spill + Location. – Ensure the area is secure and blocked off. 	LOU: x 8300 LAG: x 3333

Event Type	Meaning	Response	To Initiate
Missing or Abducted Infant or Child	Infant or Child Missing or Abduction	Move towards hallways and exits immediately Be on alert for suspicious activity and persons Report suspicious activity to Security -Baptist Health Louisville -Ext.8045 -Baptist Health LaGrange – 502-645-9380	LOU: x 8300 LAG: x 3333
Fire Alarm Activation	Fire within Hospital	R = R escue: Get Everyone Out of Area A = A larm: Pull Alarm and Call Operator C = C onfine: Close Doors and Windows E = E xtinguish or E vacuate to a Safe Place	LOU: x 8300 LAG: x 3333
Active Shooter BHLOU	Active Shooter in Hospital (an individual is brandishing or firing a weapon)	Report an active shooter to security immediately. All staff take action: “Run, Hide, Fight”.	Dial 9-1-1 Then, when safe to do so: LOU: x 8300 LAG: x 3333
Internal or External Disaster	Disaster	Internal or External: Know Location and How to Evacuate Building if Necessary	LOU: x 8300 LAG: x 3333
Security STAT/Security Assistance Required	Potentially Violent Behavior or <i>presence</i> of a weapon	Report Any Disorderly or Potentially Physical misconduct to Security Immediately. Report the Presence of Any Weapon	LOU: x 8300 LAG: x 3333
Workplace Violence/Threat of Violence	Violent physical misconduct	Report Any Violent or Severe Physical misconduct to Security Immediately. (No Weapon Involved)	LOU: x 8300 LAG: x 3333
Earthquake	Earthquake	Seek Shelter Under Desk, Table or Bed. Stay Away From Objects That Could Fall.	
Winter Weather Plan	Snow Emergency	Refer to the Safety and Emergency Preparedness Guide.	
Tornado	Tornado	Move to Interior Areas Away From Glass; Cover Non-Ambulatory Patients with Blankets or Towels.	

Missing or Abducted Infant or Child

The infant/child security plan is implemented when an alarm is activated or an infant/child is believed to be missing from the Women’s Center, Mother/Baby, Labor & Delivery (L&D), Child Development Center, ER, or any unit providing patient care to an infant or child. A Missing or Abducted Infant or Child is announced over the public address system and mass notification system (i.e. Everbridge). All units will provide staff to monitor entrances/exits and hallways to monitor pedestrian activity.

Patients and family to stay within patient room area and staff will provide updates.

Fire Safety

Fire safety is an important issue within the hospital setting and can pose a significant risk in this environment due to the large number of non-ambulatory patients; therefore, it is imperative that you are aware of several items in preparation of a fire:

- Location of fire alarms and how to activate them
- Location of emergency exits
- Knowledge of evacuation procedures
- Location of fire extinguishers and how to operate
- Exits

At Baptist Health, we use the acronym **RACE** to help us remember the correct procedures for responding to a fire.

Follow the RACE steps

Rescue getting everyone out of the area

Alarm by pulling the alarm and calling the code number

BHLOU-call **x8300**

BHLAG-call **x3333**

Confine by closing all doors & windows

Extinguish or **E**vacuate to a safe place

If a Fire is called, please follow directions of BH Staff.

Fire Extinguishers

At Baptist Health, fire extinguishers are kept in wall boxes located throughout the hospital. The RED fire extinguisher is an ABC fire, and is to be used on any type of fire. If you should need to use a fire extinguisher, please follow these simple steps:

Pull the pin

Aim the nozzle at the base of the fire

Squeeze the nozzle

Sweep side to side

For more information, please review the Fire Response Plan, Policy #2899.

Infection Prevention and Control

While carrying out your duties within our hospital environment, you may be exposed to germs, viruses, or bacteria that are present in the hospital. These germs, viruses and bacteria can be dangerous if the proper safety precautions and prevention measures are not utilized. You can help reduce your risk of exposure by using safe infection control procedures.

Hand Hygiene

Use of a waterless alcohol-based hand-rub is the most effective means of preventing the spread of germs and infection. You should use the alcohol-based hand-rub anytime one of the following occurs:

- Before touching a patient
- Before clean or aseptic procedures
- After body fluid exposure or risk for exposure
- After touching the patient
- After touching the patient surroundings
- Before & after eating

Use of soap & water hand washing should be used:

- Whenever your hands are visibly soiled
- After using the restroom
- After any exposure to blood, body fluids, or contaminated items

Gloves

Gloves are not a substitute for hand hygiene but they are an important part of reducing the risk of exposure to germs. Always wear gloves when contact with blood, body fluids, or non-intact skin is reasonably expected or anticipated. There is always a supply of gloves available for your use. Contact a hospital staff member for specific information on where the supplies are located in each area.

Gloves should not be continuously worn outside of a patient's room or designated care area. It's important to remove gloves before leaving these areas to avoid contaminating other parts of the hospital.

Always clean your hands before and after using gloves.

Personal Protective Equipment (PPE)

Other types of personal protective equipment including gowns, masks, eyewear, resuscitation bags and mouthpieces are also available for your use. Like with gloves, use the appropriate PPE for expected or anticipated contact with blood, body fluid, or non-intact skin.

Isolation Precautions

In some cases, a patient may need to be placed in Isolation Precautions as a means to prevent the spread of infection. It is absolutely necessary for you to adhere to the isolation guidelines in order to keep your risk and the risk for others to a minimum. Carefully read and follow all posted Isolation Precautions signs. Never enter an Isolation Precautions area unless you are authorized to do so and ONLY when wearing the appropriate Personal

Protective Equipment. There are examples of some signs on page 30 that you may see in patient care areas at Baptist Health. You must follow any instructions as noted on this sign. If you have questions or concerns, be sure to talk with clinical staff before entering any patient room. Contract staff/students are not permitted to care for patients who have or are suspected of having tuberculosis (TB).

General Housekeeping/Cleaning

For your protection, it is important that you are aware that there are specific instructions for cleaning up a contaminated or potentially contaminated area of the hospital. The Exposure Control Plan outlines these instructions and highlights other pertinent information for cleaning contaminated surfaces. Some general rules:

- Always wear appropriate Personal Protective Equipment (PPE)
- Never use your hands to pick up broken glass. Use a broom and dustpan.
- Avoid agitation of contaminated laundry and handle it as little as possible
- Place contaminated laundry in the appropriate leak-proof bag
- Replace contaminated equipment or protective coverings
- Do not clean up spills unless directed by clinical staff.

(For more information, the "Exposure Control Plan" is located on the Intranet.)

Tuberculosis (TB)

Tuberculosis (TB) is spread from person to person through the air. When a patient infected with pulmonary or laryngeal TB coughs or, sneezes, the TB germ can be expelled into the air. The droplet nuclei can remain suspended in the air for several hours. If another person inhales the air containing the droplet nuclei with the TB germ, transmission may occur.

Because of the way in which pulmonary or laryngeal TB is transmitted, when tuberculosis is known or suspected in a patient, proper Isolation Precautions and infection control measures must be followed to prevent exposure to the patient's air droplet nuclei which may contain the TB germ.

Any patient with known or suspected TB will be placed in an Airborne Infection Isolation room. The Airborne Isolation room is a specialized isolation room with proper ventilation and air exchanges, in addition to negative air pressure. The ventilation and air exchanges are designed to reduce the amount of the TB germ in the room at any given time and provide eventual ventilation of the room air to the outside of the building. The negative air pressure helps to contain the TB germ to the room when the doors are opened for entry into the room. In order to maintain the negative air pressure in the room, the door/doors leading into the room must be kept closed, except when going into the room or leaving the room. For all rooms with an anteroom, never open both doors at the same time.

An Airborne Isolation Precautions sign will be placed on the outer door to alert staff that the patient is in Airborne Isolation. A particulate respirator mask, for which the individual must be fit-tested, must be worn at any time that the room is entered. Contract staff/students are not fit-tested, and therefore are not permitted to care for patients who have or are suspected of having TB.

When a TB patient is to travel outside of the Airborne Infection Isolation room to any area of the hospital (e.g., surgery, radiology) the patient must wear a regular surgical mask to prevent TB germs from being expelled into the air outside of the room.

The TB evaluation is an important part of assessing for exposure to the TB germ and TB disease. For the safety of patients and staff at Baptist Health, and in accordance with state regulations, a TB evaluation is required on initial assignment within any Baptist facility, and on an annual basis as outlined in the Baptist Health System policy *Mycobacterium Tuberculosis Testing of Baptist Healthcare Workers*.

Students are not to be assigned to TB patients. Contract staff may not care for TB patients unless they have had a medical clearance and fit tested to a NIOSH approved N95 or higher-level respirator.

Bloodborne Pathogens

While carrying out your duties within our hospital environment, you may be at risk of exposure to micro-organisms bacteria or viruses called “bloodborne pathogens”. There is an Exposure Control Plan that outlines the protective measures in place to minimize or eliminate the risk of exposure for healthcare workers. It also outlines measures in place to provide appropriate treatment in the event of an exposure. This plan is located in the Intranet and can be accessed on hospital computers. You are encouraged to read this material. If you have any questions or concerns, please contact clinical staff, Infection Control or your clinical advisor.

Types of Bloodborne Pathogens

There are three types of bloodborne pathogens that pose the most serious occupational threat to health care workers:

- Human Immunodeficiency Virus (HIV)
- Hepatitis B Virus (HBV)
- Hepatitis C Virus (HCV)

Potential Ways to Be Exposed on the Job

- Needle sticks or puncture wounds from contaminated needle
- Blood or body fluids on open cuts, abrasions, or rashes
- Blood or body fluids splashed in the eyes, nose or mouth
- Contaminated objects can transmit Hepatitis B (virus can live on objects for up to 4 weeks)

Universal and Standard Precautions

Universal Precautions is an approach to infection control that assumes that all human blood and body fluids except sweat are potentially infectious. The term Standard Precautions refers to basic practices that apply to all patient care regardless of the patient’s suspected or confirmed infectious state. Practices include hand hygiene, and appropriate use of personal protective equipment such as gowns, gloves and face masks. Following these precautions can greatly reduce your risk of exposure. Standard Precautions are outlined in greater detail in the Exposure Control Plan.

Exposure Prevention

Several engineering and work practice controls are in place to help minimize your exposure risk.

- Always wear appropriate Personal Protective Equipment (gloves, mask, gowns, and eye protection).
- Never eat, drink, apply cosmetics or lip balm, handle contact lenses or store food or drink in areas where blood, body fluids, or specimens are present
- Immediately perform hand hygiene* after contact with blood, body fluids, or after removing gloves and personal protective equipment
- Immediately flush any mucous membranes (eyes, nose, mouth) with water if there is any exposure to blood or body fluids
- Contact a staff member immediately if you see a contaminated needle/sharps that has not been discarded in the appropriate puncture-resistant sharps container
- Contact a staff member immediately if you see medical waste (materials soaked in blood or body fluids) that have not been discarded in the appropriate red biohazard container
- Do not handle or reuse soiled linen or laundry
(**See Infection Control-Hand Hygiene Section*)
(For more information, the “Exposure Control Plan” is located on the Intranet.)

Infection Prevention

MASK INSTRUCTIONS

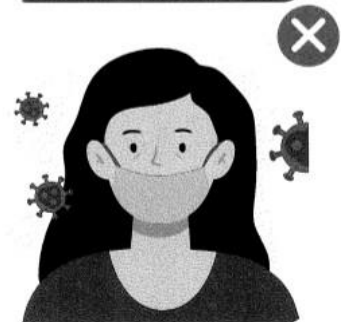
For everyone's safety, visitors are expected to comply with our universal masking policy during the entire visit.

- 1 Clean hands before touching / putting on mask.
- 2 Mask has a **front, back, top** and **bottom**.
- 3 Front of mask “folds” point down and may be colored. The front should face away from you.
- 4 The top of the mask has a wire which molds over the bridge of the nose.
- 5 Fit mask to cover face (nose and mouth).
- 6 Wear mask upon entry to the facility and remove mask after leaving the facility. Clean hands.
- 7 Do not touch the mask while it is on your face.
- 8 Mask should always cover nose and mouth and should never be pulled down under chin.

The **CORRECT** way to wear a face mask. Face mask is shown secured over nose and mouth.



The **INCORRECT** way to wear a face mask. Face mask is secured under nose.



KEEP HANDS CLEAN

- 1 Clean hands frequently. If washing with soap and water, wash your hands for 20 seconds or more, making sure to get under your nails.
- 2 Clean your hands when entering a patient's room, before touching a patient and before you leave the patient's room.
- 3 Clean hands before touching eyes, nose or mouth and before eating.
- 4 Clean hands after using the bathroom, blowing nose, coughing or sneezing.
- 5 Clean hands after touching frequently touched surfaces (door handles, elevator buttons, bed rails, light switches, etc.)



BAPTIST HEALTH®

Examples of Isolation Signage



STOP

CONTACT PRECAUTIONS

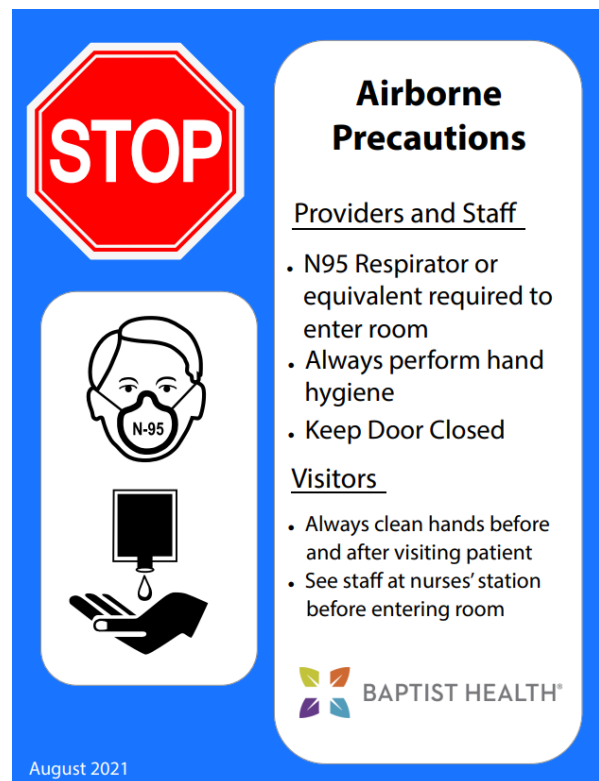
DOCTORS AND STAFF

- Always wear **gown** and **gloves** to enter patient room
- Always perform hand hygiene

VISITORS

- Always clean hands before and after visiting patient
- Wear gown and gloves for contact with patient





STOP


Airborne Precautions

Providers and Staff

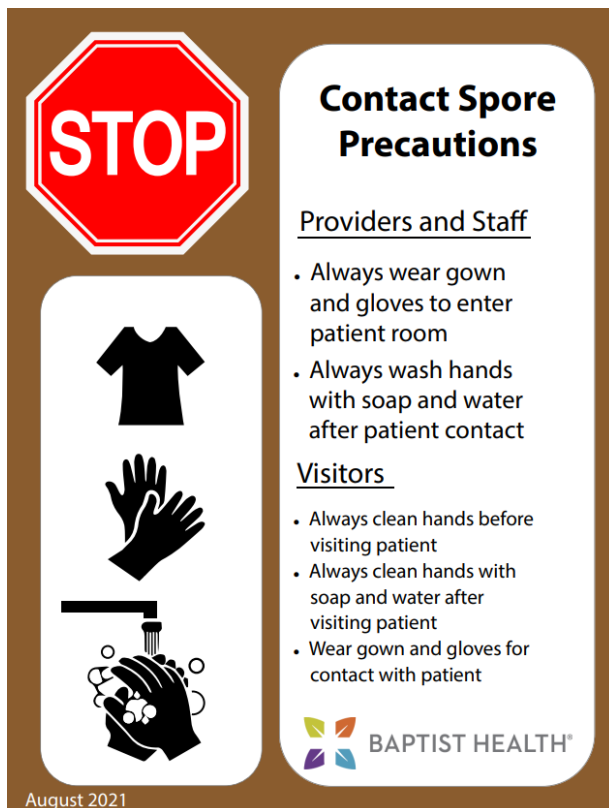
- N95 Respirator or equivalent required to enter room
- Always perform hand hygiene
- Keep Door Closed

Visitors

- Always clean hands before and after visiting patient
- See staff at nurses' station before entering room



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STOP


Contact Spore Precautions

Providers and Staff

- Always wear gown and gloves to enter patient room
- Always wash hands with soap and water after patient contact

Visitors

- Always clean hands before visiting patient
- Always clean hands with soap and water after visiting patient
- Wear gown and gloves for contact with patient



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Personal Protective Equipment

Personal Protective Equipment (PPE) provides an important barrier between you and germs, bacteria, microorganisms, or hazardous materials. It is imperative that you always wear appropriate personal protective equipment for any situation that may pose an exposure risk for you. Personal Protective Equipment is available at all times for your use. Contact a hospital staff member for specific information on where the supplies are located in each area. Always remember to use, remove and dispose of the items appropriately as outlined in the Exposure Control Plan.

Gloves

To reduce your risk of exposure, you should always wear gloves when contact with blood, body fluids, or non-intact skin is reasonably expected or anticipated. When using gloves, it is important for you to know the following:

- Gloves used for patient care or for patient contact should be used ONLY once and then thrown away
- Never wash and reuse gloves used for patient care or patient contact
- Latex free gloves are available for your use. If you have a latex allergy or suspect you may have a latex allergy, contact a staff member for assistance
- Always cover cuts or abrasions with bandages before wearing gloves
- Replace gloves immediately if they become torn or punctured
- Always perform hand hygiene* after removal of gloves
(*See *Infection Control-Hand Hygiene Section*)

Protective Equipment

Other types of protective equipment including gowns, masks, eyewear and mouthpieces are also available for your use. Contact a hospital staff member for specific information on where the supplies are located in each area.

(For more information, the "Exposure Control Plan" is located on the Intranet.)

Should an exposure to a Bloodborne pathogen occur:

- Report the incident to direct supervisor, mentor, or leader.
- Call Employee Health and speak to the Exposure Specialist at 1-833-743-0528, being prepared to give information on the source in which they were exposed (first & last name, DOB, MRN) if the source is known;
- Students need to notify their program.

Latex Allergy

Latex is a milky fluid from the *Hev brasiliensis* or rubber tree. This substance contains proteins that may cause allergic reactions in some people. Examples of products that may contain latex in the healthcare setting include: gloves, stethoscopes, catheters, TED hose, tourniquets, and mattresses. Commonly encountered items that may include latex include: rubber bands, erasers, balloons, shoe soles and carpeting. People who are allergic to certain “cross-reactive” foods, may also be allergic to latex. Exposure to latex elicits a response similar to the one elicited by the foods.

In performing your role at the hospital, it is possible that you may be exposed to some form of latex. Exposure to latex may occur by direct contact or via inhalation of airborne latex particles. Reactions vary from irritant contact dermatitis to anaphylaxis.

All patients during registration are asked about latex allergy. **BHLOU ONLY:** Patients that are Latex allergic, an orange armband is placed on their wrist. Patients are assigned a private room if available. If not, both patients in semi-private room are treated with Latex precautions. A Latex Allergy Precautions sign will be posted on inpatient door.

Use latex free supplies when latex allergy is identified. If unsure if product contains Latex, do not use and notify the manufacturer or Materials Management. Document that Latex free products were used on these patients.

Baptist Health La Grange: post sign on door, over the patient’s bed and on the patient chart.

Hazardous Drugs (HD) in the Healthcare Setting

The United States Pharmacopeia (USP) establishes standards to ensure the quality, safety and benefit of medications. In 2019, the United States Pharmacopeia (USP) created a new regulation to enforce compliance with the safety recommendations previously outlined by NIOSH (National Institute for Occupational Safety and Health). This regulation is comprehensive addressing all medications on the NIOSH list and is expected to be enforceable by the Joint Commission in Nov 2023.

Since 2010, NIOSH has published a list of hazardous drugs that require additional precautions when handling. Continued research on the use of these medications has found that exposure to hazardous agents *in an occupational setting* has an increased risk of causing employee health effects including:

- Increased risk of leukemia or other cancers
- Risk of organ damage
- Impact the ability of men and women to successfully conceive
- Increased risk of birth defects or miscarriage

Baptist Health has developed protocols to maintain employee safety based on the medication risk. All NIOSH medications at Baptist have been divided into one of three groups to better outline risk and protective measures: 1) Group 1-Antineoplastic, 2) Group 1-Non- Antineoplastic 3) Group 2-Reproductive Risk Only (male and female).

While many of the medications have been used for years, overtime, NIOSH has accumulated data to recommend that even occupational exposure to these agents may present employee harm and added precautions should be taken to reduce employee risk. This includes all levels of care

surrounding the medication-from shipping/receiving, dispensing, compounding, administration, patient care, spills, transport, waste, etc. Exposure to a HD may occur through excretion of any bodily fluid via direct contact, contaminated clothing/linen or solid surfaces, increasing health risk. Baptist Health has implemented numerous ways to know if a patient is receiving a HD which include:

- Medications will come from pharmacy with appropriate labeling about HD
- Omnicell will have alerts about hazardous risk
- EPIC screen will display the following:

Hazardous Med Alert



- Signs will be posted on patient door outlining the risk based on medication used and the PPE to be worn when handling bodily fluids.
- Ticket to Ride will have hazardous drug symbol denoting patient is receiving a hazardous drug



Signage

Signs will be posted on patient door outlining the risk based on medication used and the PPE to be worn when handling bodily fluids.

STOP ATTENTION STAFF

GROUP 1 HAZARDOUS MEDICATION - ANTINEOPLASTIC

Precautions are required for all staff in contact with bodily fluids from patients who have received a hazardous medication within the past seven days.

Double glove and wear a chemo gown – NOT an isolation gown. Wear eye and face protection if splash is likely. If risk of aerosolization (toilet flush) add N95.

PPE DISPOSAL: Disposed of in trace chemo waste container.

LINEN: Only linen contaminated with medication or bodily fluids needs to be in a large, yellow linen bag.

Visitors: Above precautions only needed if in contact with bodily fluids. Contact nurse if questions.

BAPTIST HEALTH

STOP ATTENTION STAFF

GROUP 1 HAZARDOUS MEDICATION

Precautions are required for all staff in contact with bodily fluids from patients who have received a hazardous medication within the past seven days.

Double glove. Wear a chemo gown, NOT an isolation gown, eye and face protection if splash is likely. If risk of aerosolization (toilet flush) add N95.

PPE DISPOSAL: May be disposed of in normal trash.

Visitors: Above precautions only needed if in contact with bodily fluids. Contact nurse if questions.

BAPTIST HEALTH



ATTENTION STAFF

GROUP 2 HAZARDOUS MEDICATION - REPRODUCTIVE RISK ONLY

**Staff who are pregnant, breastfeeding
or planning to become pregnant:**

Precautions are required for all staff, male and female, at reproductive risk in contact with bodily fluids from patients who have received a hazardous medication within the past seven days.



Double glove. Wear a chemo gown, NOT an isolation gown, eye and face protection if splash is likely. If risk of aerosolization (toilet flush) add N95.

PPE DISPOSAL: May be disposed of in normal trash.

Visitors: Above precautions only needed if in contact with bodily fluids. Contact nurse if questions.
All other staff follow universal precautions.



08/14/2022

Resources

- Refer to Pharmacy Resource Page located in SharePoint for the most up-to-date USP800/HD information.
- Site location: BEN>Resource Tab>Pharmacy Resources>Hazardous Medication Resources
- Hyperlink on the MAR that will link to the “Handling Guide” for detailed information

Hazardous Waste Management

Hazardous substances are commonly found in healthcare facilities. A hazardous material is defined as any chemical, substance or material that presents a known or potential hazard to a patient, staff, visitor, or the community. While performing your duties within our hospital environment, there is the possibility that you may be exposed to hazardous materials or products. To protect yourself, you should know the following:

- The types of hazardous materials you may be exposed to
- How to find and read a Safety Data Sheet
- Where to find personal protective equipment
- What emergency procedures to follow

Warning Labels

A warning label is typically found on the product container and provides very basic information about a hazardous product. The information may vary but usually contains product identification, warnings about health hazards, and emergency or first aid procedures.

Safety Data Sheets

A Safety Data Sheet (SDS) is a detailed informational bulletin prepared by the product manufacturer that identifies the product and describes the product's health hazards, routes of exposure, signs and symptoms of exposure, emergency and first aid procedures, and precautions for safe handling and use. At Baptist Health, the SDS is available for your reference at any time and can be found via the Intranet.










Emergency Procedures

In the event of an emergency or spill, you should follow the Internal Hazardous Materials Release policy (see Emergency & Disaster Codes section).

Hazard Communication Standard Pictogram

Each pictogram consists of a symbol on a white background framed within a red border and represents a distinct hazard(s). The pictogram on the label is determined by the chemical hazard classification.

HCS Pictograms and Hazards

<p>Health Hazard</p>  <p>Carcinogen Mutagenicity Reproductive Toxicity Respiratory Sensitizer Target Organ Toxicity Aspiration Toxicity</p>	<p>Flame</p>  <p>Flammables Pyrophorics Self-Heating Emits Flammable Gas Self-Reactives Organic Peroxides</p>	<p>Exclamation Mark</p>  <p>Irritant (skin and eye) Skin Sensitizer Acute Toxicity Narcotic Effects Respiratory Tract Irritant Hazardous to Ozone Layer (Non-Mandatory)</p>
<p>Gas Cylinder</p>  <p>Gases Under Pressure</p>	<p>Corrosion</p>  <p>Skin Corrosion/Burns Eye Damage Corrosive to Metals</p>	<p>Explosion Bomb</p>  <p>Explosives Self-Reactives Organic Peroxides</p>
<p>Flame Over Circle</p>  <p>Oxidizers</p>	<p>Environment (Non-Mandatory)</p>  <p>Aquatic Toxicity</p>	<p>Skull and Crossbones</p>  <p>Acute Toxicity (fatal or toxic)</p>

For more information, please see the Hazard Communication Program Policy

Radiation Safety

While performing your duties, there is the possibility that you may be exposed to radiation. Under normal circumstances, radiation exposure levels associated with healthcare are extremely low and safe. However, because exposure to high levels of radiation can be dangerous, precautions must be taken to minimize your risk of high-level exposure.

For your safety, you should be familiar with the radioactive symbol shown here.



Sources of Radiation

There are two general sources of radiation: 1) Radiation producing machines, such as X-ray units, and 2) Radiation producing materials such as isotopes used in imaging examinations. Radiation exposure can occur by contamination of the skin or clothing, breathing or ingesting radioactive materials or by exposure to radiation from patients, sources, and machines. Areas of the hospital where radiation/radioisotopes are present include Radiology, Nuclear Medicine, CT, Cath Lab, Surgery, Oncology, Pain Clinic, Laboratory, and Radiation Therapy.

General Precautions

You should avoid areas or objects containing the universal radiation warning symbol and areas with yellow and red warning signs that say, “Caution Radioactive Material” or “Caution Radiation Area”.

In some cases, a patient may require treatment in an area where this radiation symbol is present. If you must enter one of these areas, always consult with the technologist performing the procedure for the best precautionary methods. As a precaution, you will either be instructed to wear a lead apron or stand in the control booth during the procedure to shield yourself.

If you are pregnant, you should inform the technologist immediately.

Radiation Safety Officer

The Radiation Safety Officer (RSO) is always available to address any questions or concerns you may have about radiation safety. To contact the RSO, please notify the technologist. If you have any questions, you may also contact the BHL0U Radiology Department at x 8280 and at BHLAG x 3620.

Regulated Medical Waste

Healthcare facilities routinely generate large amounts of potentially hazardous medical waste. Medical waste is discarded in red plastic lined waste containers or red bags that are labeled with the biohazard symbol.

For your protection, you should become familiar with the biohazard-warning symbol shown here on the right:



Types of Regulated Medical Waste

- Needles and sharps containers
- Suction canisters that cannot be emptied

- Placentas/afterbirth tissue
- Disposable items saturated with blood/body fluids
- Pathologic waste
- Biologic waste

Unless you are authorized, you should never empty or move trash containers labeled with the biohazard symbol. If you find a regulated medical waste item that has not been properly disposed of in the red container, please contact a member of the hospital staff IMMEDIATELY. You SHOULD NOT handle the item.

Slips, Trips & Falls

Injuries resulting from slips, trips, and falls can be greatly reduced by being attentive to your surroundings. Always observe wet or slippery floor signs and use caution while walking in these areas. If you spot a wet or slippery floor, please report it immediately to a hospital staff member or contact the Environmental Services Department (BHLou-x8483 or BHLag-x3419) from any house phone. If an injury were to occur, please contact your supervisor, instructor, or agency. Complete a SAFE Report under the Fall ICON if there was some sort of injury, noting “visitor”.

Back Safety

While performing your duties within our hospital environment, you may find yourself in situations that require lifting or bending. Because of this, it is important that you understand some general back safety information.

Back injuries are most often caused by a combination of stress and strain over a period of time. Examples may include: poor posture, faulty body mechanics, improper lifting techniques, stressful living/working habits, loss of strength and flexibility, and general decline of fitness and conditioning. By continually exposing your back to these stresses and strains, you may temporarily or permanently damage structures of the spine, i.e. muscles, discs, ligaments. To help prevent these types of injuries, always utilize the proper posture needed for the task. Be sure to maintain proper posture throughout all daily activities.

When Standing

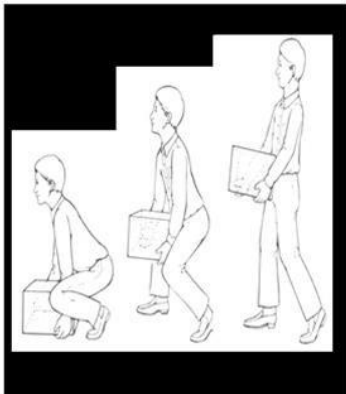
- Keep your ears over your shoulders, shoulders over hips and keep a comfortable/wide base of support
- Tighten your stomach muscles to assist in supporting your back
- Adjust your work height so that you can maintain a balanced posture

When Sitting

- Sit with your hips against the back of the chair and your feet on the floor
- Keep hips, knees and elbows at 90 degrees
- Keep your back supported in the normal curve (use a lumbar roll if chair doesn't have one)
- Limit your sitting time and change your position regularly

When Lifting

- Plan your lift
- Push rather than pull when possible
- Stand with your feet shoulder width apart
- Keep stomach and back muscles tight
- Bend your knees, and lift with your legs
- Keep your head up & the object close to you
- Get help when needed, or use mechanical assistance when available



When LIFTING:

- Plan your lift
- **Push** rather than pull
- **Stand with your feet shoulder-width apart**
- **Bend your knees and lift with your legs**
- Maintain the normal inward curve of your low back during the lift
- Keep stomach & back muscles tight
- **Keep your head up** and keep the object close to you
- Get help when needed and use mechanical assistance if available (ie: raise bed to your level, use hand cart to move objects)



- Bend your knees, not your back.
- Lift with your legs.

Baptist Safety Tool



STAR Thinking: Building a habit of pausing before performing a task or procedure.

Attitude of Questioning: We want staff to feel empowered to ask questions when they arise.

Fundamentals of Safety: Basic safety measures such as washing your hands.

Fundamentals also include standardization of work rather than everyone doing something different, which brings about opportunities for variation and errors.

Effective Communication: Communication is one of the top reasons for adverse events (either lack of communication or there is a breakdown in communication).

Reinforce: Making sure we are being accountable. I am accountable for me and you (200% accountable). We want to check each other to prevent mistakes and encourage and coach each other when necessary.

General Information & Guidelines for Students, Vendors, Contract Staff, Allied Health Professionals, Forensic Staff and Physicians

I acknowledge that I have received the Baptist Health Louisville/ Baptist Health La Grange General Information and BHS/BHLOU Corporate Compliance Guidelines for Students, Vendors, Contract Staff, Allied Health Professionals, and Physicians. I have read the contents of this booklet, will familiar myself with the information contained herein, understand that the same outlines my responsibilities as a student and I understand who to contact with questions, and need to comply with the guidelines.

I understand that the contents of the Baptist Health Louisville/Baptist Health La Grange General Information and BHS/BH LOU Corporate Compliance Guidelines for Students, Vendors, Contract Staff, Allied Health Professionals, and Physicians do not constitute an employment contract between me and the organization.

I agree to personally support a Culture of Safety at Baptist Health Louisville/Baptist Health La Grange.

I have reviewed and executed the Baptist Health Louisville/Baptist Health La Grange Shadowing/Clinical and Confidentiality Agreement and will abide by it in both its language and spirit, including my obligation to abide by the Baptist Health HIPAA Privacy and Security Policies associated procedures.

I agree that I am personally obligated to protect confidential patient information so as to ensure the privacy of Baptist Health Louisville/Baptist Health La Grange patients and that such information shall not be accessed and/ or disclosed unless specifically authorized to do so.

(please print)

Name: _____

Date: _____

Address: _____

E-mail address: _____

Emergency Contact: _____

Phone: _____

School or Company: _____

Baptist Health Louisville/ Baptist Health La Grange Shadowing/Clinical and Confidentiality Agreement

I, _____, have requested, and Baptist Health Louisville/ Baptist Health La Grange hereby grants permission to be present in the hospital, or home health, for observation to enhance my education. By signing this Confidentiality Agreement, do hereby represent that I have read and understand the following:

1. A shadowing or clinical experience has been arranged for me to observe a work unit and the staff at Baptist Health Louisville/Baptist Health La Grange as part of the interview process, or by school contract, or for a student observation request.
2. I understand that this experience does not entitle me to any wages, workers' compensation, or guaranteed employment with Baptist Health Louisville/ Baptist Health La Grange.
3. While shadowing a Baptist Health Louisville/ Baptist Health La Grange employee performing his/her duties or participating in a clinical experience at Baptist Health Louisville/ Baptist Health La Grange, I will conduct myself in accordance with all policies and the Baptist Health Louisville/ Baptist Health La Grange standards of conduct.
4. I understand that Baptist Health Louisville/ Baptist Health La Grange is not responsible for injuries that I incur solely as a result of my own negligence. I acknowledge that I will be responsible for paying for any medical treatment I receive as a result of injuries incurred during the course of my shadowing experience.
5. I understand that Baptist Health Louisville/ Baptist Health La Grange is not responsible for my exposure to any communicable diseases during this experience.
6. I understand that information regarding patients or former patients is confidential. I agree to permanently maintain the confidentiality of all patient information obtained or learned during my experience and understand that an inability to maintain patient confidentiality during this experience may result in immediate dismissal and/or additional legal ramifications.
7. I understand that any action on my part, which is not fully consistent with the above statements, may warrant termination of this experience.
8. I understand that Baptist Health Louisville/ Baptist Health La Grange may terminate my experience at any time, with or without cause and without explanation to me.

In return, for permission to participate in this experience at Baptist Health Louisville/ Baptist Health La Grange, I, the Job Shadow Participant, agree to adhere to the following rules:

- Read Baptist Health Louisville/ Baptist Health La Grange job shadow program policy, and adhere to the policy. I will ask questions if I do not understand the policy of Baptist Health Louisville.
- Present this signed form prior to the job shadowing experience (if a minor, a parent or legal guardian's signature is mandatory);
- Follow good hand-washing techniques;
- Adhere to the job shadow dress code;
- Wear personal protective equipment if there is a potential of contacting blood or other body fluids as appropriate to the work area;
- Wear a name tag identifying myself as a student;
- Inform my mentor if at any time I feel nauseous, dizzy or otherwise ill during the shadowing activity;
- Arrive promptly and remain flexible to allow for extenuating circumstances such as patient emergencies that might interrupt the schedule;
- Remain at all times where directed and leave the areas when requested to do so by a physician, nurse, or administration;
- At the conclusion of my assignment, complete an evaluation of the program and return it to my mentor.

I have read and understand the above statements and accept them as conditions of shadowing experience at Baptist Health Louisville/ Baptist Health La Grange.

Signature: _____ Date: _____

Print Name: _____ Job role to observe: _____

Scheduled Date of Job Shadow Experience: _____

Witnessed by: _____